**Professional Membership Form**

This level of membership category is open of those whose ***primary*** professional business or employment is information security or the associated disciplines such as cyber security, technical risk management, privacy control or fraud management.

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| --- | --- |
| Name of applicant |  |
| Organisation name |  |
| Sector |  |
| Email address |  |
| Please provide a summary of your activities and their relevance and real contribution to information security  E.g. currently CISO etc |  |
| Please provide details of relevant qualifications eg CLAS, CISSP |  |
| Please provide details of memberships of relevant bodies |  |
| Please explain why you would like to become a professional member of the SWCSC |  |
| How do you feel you can contribute towards the SWCSC’s aims and purpose and to commit to these. |  |

*Successful applicants are likely to include those who offer dedicated infosec products or services and as such, technical or non technical will be considered. The crucial factor will be your relevance and real contribution to information security. Relevant qualifications, memberships and appropriate active employment roles, will have a bearing. Selection will then be determined by the Steering Group as a whole, during the monthly meetings*